

## MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION SECTION OF SPECIAL EDUCATION PROGRAM DEVELOPMENT

## DETERMINATION OF NEED FOR EDUCATIONAL SURROGATE APPOINTMENT

DESE USE ONLY Approved
Disapproved
Comments

NOTE: TO BE COMPLETED BY LOCAL EDUCATION AGENCY (Complete all items)

STUDENT INFORMATION	REFERRING DISTRICT
Name	District Name
Social Security Number Date of Birth	
Residential Facility	Title
Contact Person/Title	
Street	Phone Number
City State Zip	_
Phone Number	_
SCHOOL ATTENDING	CASEMANAGER INFORMATION
Name of District	Name —
Street	Agency Name —
City — State — Zip —	Street
Phone Number	City — State — Zip — Phone Number—
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Please	
Signature	Date

RETURN TO keep a copy for your records

Dana Desmond, Educational Surrogate Program
Department of Elementary and Secondary Education
Special Education Compliance
P. O. Box 480, Jefferson City, MO 65102

Phone #: 573-526-7605 Fax #: 573-526-5946

The Missouri Department of Elementary & Secondary Education ensures equal employment/educational opportunities/affirmative action regardless of race, color, creed, national origin or sex, in compliance with Title VI & Title IX, or disability, in compliance with Section 504 and the Americans With Disabilities Act.